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DIVISION OF HEALTH CARE FINANCING


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MEMORANDUM

DATE: September 19, 2003

TO: All Pharmacies, Dispensing Physicians, HMOs, and Blood Banks

FROM: Mark B. Moody, Administrator 
Division of Health Care Financing

SUBJECT: Updated Section of the Medicaid Pharmacy Handbook

I. Updated Pharmacy Data Tables

The Pharmacy Data Tables section of the Wisconsin Medicaid Pharmacy Handbook is attached. This section has been updated and includes changes to the following tables:

- Appendix 1 – Numeric Listing of Manufacturers That Have Signed Rebate Agreements. This list includes a column identifying manufacturers who signed a rebate agreement for SeniorCare.
- Appendix 2 – Less Than Effective/Identical, Related, or Similar Drugs.
- Appendix 3 – Legend Drug Maximum Allowed Cost (MAC) List.
- Appendix 7 – Diagnosis Restricted Drugs

II. Providers Should Keep CD-ROM from July 2003

Since this CD-ROM contains only the updated Data Tables section of the Wisconsin Medicaid Pharmacy Handbook, pharmacy providers should keep the July 2003 Pharmacy Handbook CD-ROM. This assures that you have the entire Pharmacy Handbook, including SeniorCare, the All-Provider Handbook, and the Disposable Medical Supplies Handbook.

III. Certain Stimulant Drugs Are Diagnosis Restricted

Certain stimulant drugs have been added to the diagnosis-restricted drug list to be effective on and after October 1, 2003. Appendix 7 is a complete listing of drugs requiring diagnosis codes as a part of the drug claim. This list includes the acceptable diagnosis codes for each drug.

IV. One Prior Authorization Approval per Drug Category Allowed

Currently proton pump inhibitor (PPI) drugs as well as COX-2 nonsteroidal anti-inflammatory drugs (NSAIDs) require prior authorization (PA) but may have several approved PAs for the same drug. Effective October 1, 2003, only one active PA for each drug category will be allowed. Providers are reminded that when a PA is requested, it may be granted for up to 365 days. When the STAT-PA system asks for a quantity requested, you should enter "365." You may then be granted a PA number, which is used every month for a year.

V. Over-the-Counter Prilosec Covered

Wisconsin Medicaid covers over-the-counter (OTC) Prilosec. OTC Prilosec does not require PA but remains diagnosis-restricted only.

VI. Levitra Not Covered

Under HFS 107.10(4), Wis. Admin. Code, Wisconsin Medicaid does not cover drugs provided for the treatment of impotence. Therefore, Levitra (Vardenafil) is not covered by Wisconsin Medicaid.

VII. Additional Copies of Publications

All Wisconsin Medicaid and BadgerCare Updates, as well as the Pharmacy Handbook and the All-Provider Handbook, can be downloaded from the Medicaid Web site at www.dhfs.state.wi.us/medicaid/. Additional copies of the handbook may be downloaded from the CD-ROM.

Pharmacies will automatically receive a CD-ROM quarterly, unless they inform Provider Services that they want only a paper copy. Pharmacies may receive either a CD-ROM or a paper copy, but not both.

If you would like to receive only paper copies of pharmacy materials, please call Medicaid Provider Services at (800) 947-9627 or (608) 221-9883.

If you have questions about the information in this handbook, please call Medicaid Provider Services.

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Enclosure